Attorney Docket No.

032817-002

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Hiroyuki Suzuki et al.

Application No.: 09/495,899

Filing Date:

February 2, 2000

Title: IMAGE PROCESSING APPARATUS

Group Art Unit: 2626

Examiner: MADELEINE ANH VINH NGUYEN

Confirmation No.: 5436

REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL LETTER

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Customer Number 2 1 8 3 9

Sir:

| Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$395.00 (2801) \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e). |
|--|
| A. Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified in item 2 below. |
| B. Applicant(s) previously submitted the following documents for which continued examination is requested: |
| Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on |
| Consider the arguments in the Appeal Brief or Reply Brief previously filed on |
| Other: |
| |
| |
| The following documents are enclosed with this submission: Amendment/Reply. |
| Affidavit(s)/Declaration(s). |
| Information Disclosure Statement (IDS). |
| A Petition for Extension of Time. |
| Other: |
| 01/11/2006 HALI11 00000117 09495899 |

790.00 OF

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| Attorney Docket No | 032817-002 | | |
|--------------------|------------|--|--|
| Application No | 09/495,899 | | |

| 3. | | Small entity status is hereby claimed. |
|----|---|---|
| | X | No additional claim fee is required. |
| | | The fee is calculated below on the basis of the highest number of claims already paid for in this |
| | | application prior to this submission: |

| | | | | CLAIMS | | | |
|-----------------------|------------------|-------------|---------|---------------------|----|------------------|-----------|
| | No. of Claims | | | Extra Claims | | Rate | Fee |
| Examination Fee (18 | 301) | | | | | | \$ 790.00 |
| Total Claims | | MINUS | = | 0 | × | \$50.00 (1202) = | \$ 0.00 |
| Independent Claims | | MINUS | = | 0 | × | \$200.00(1201) = | \$ 0.00 |
| If multiple dependent | claims are p | resented, a | dd \$ | 360.00 (1203) | | | |
| Total Fee | | | | | | | \$ 790.00 |
| ☐ Small Entity Statu | s claimed - s | ubtract 50% | 6 of To | otal Application Fe | ee | | \$ 0.00 |
| TOTAL FEE DUE | | | | | | | \$ 790.00 |

| 4. | X | A check in the amount of \$790.00 is enclosed for the fee due. |
|----|---|---|
| 5. | | Charge to Deposit Account No. 02-4800 for the fee due. |
| 6. | | Charge to credit card. Form PTO-2038 is attached. |
| 7. | | Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. |

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL PC

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Filed: 1-9-06

William C. Rowland

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